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LDT
1-15-03

**REQUEST TO RESCIND
NONPUBLICATION
REQUEST
35 U.S.C. 122(b)(2)(B)(ii)**

Application Number	10/045786
Filing Date	01/11/2002
First Named Inventor	Sandra Lynn Carrico et al.
Title	IPSec Through L2TP
Atty. Docket Number	2001-0416
Group Art Unit	2152
Examiner	Not Yet Assigned

RECEIVED

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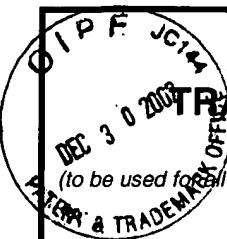
I hereby **rescind** the previous request that the above-identified application not be published under 35 U. S. C. 122(b).

Dec. 20, 2002
Date

Signature

Benjamin S. Lee
Typed or printed name
Reg. No. 42787

This request must be signed in compliance with 37 CFR 1.33(b).


**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in this Submission

2

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Enclosures (check all that apply)**RECEIVED**

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment & Recordation Cover Sheet	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) & Letter to Official Draftsman	<input type="checkbox"/> Appeal Communications to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communications to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to the Commissioner	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits / Declaration(s)	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> CD, Number of CDs
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	<input checked="" type="checkbox"/> Additional enclosure(s) <i>(please identify below)</i>
<input type="checkbox"/> Certified Copy of Priority Document(s)	Request to Rescind Nonpublication Request	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME	Benjamin S. Lee	Reg. #	42787
TELEPHONE	908-532-1904		
SIGNATURE			DATE <u>12/20/2002</u>

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage thereon as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on this date: 12/20/2002

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Signature		Date	<u>12/20/2002</u>

SEND TO: Commissioner for Patents, Washington, D.C. 20231